STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS



Department of Corrections

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March 16, 2018

The Honorable Terry Gerratana
The Honorable Heather Somers
The Honorable Jonathan Steinberg
Co-Chairs, Public Health Committee
Legislative Office Building, Room 3000
Hartford, CT 06106

RE: SB-172 – An Act Establishing Medication-Assisted Treatment Program for Opioid Addiction Within State Correctional Facilities

Dear Sen. Gerratana, Sen. Somers, and Rep. Steinberg:

I understand that you have legislation pending before you which would establish a Medication-Assisted Treatment (MAT) program for opioid addiction in state correctional facilities. Rhode Island began a MAT program within its Department of Corrections in 2016 when we received a budgetary allocation of \$2 million; part of an effort spearheaded by Governor Raimondo to reduce opioid related deaths in our state. As the current Acting Director of the Rhode Island Department of Corrections, I wanted to share our experience as you consider your legislation.

The MAT program has been very successful thus far in Rhode Island. Eric Beane, the Secretary of Health and Human Services, has ably described the public health benefits and potential cost savings resulting from the program. The numbers are impressive: a 60% reduction in post-incarceration overdose deaths, leading to a 12% reduction in total opioid overdose deaths over the first six months of 2017. While these numbers are very encouraging, we know that one death is too many, and we still have work to do.

As Director, I am responsible for both the safety and security of the correctional system and also the rehabilitation of inmates. Studies have shown that individuals on treatment are up to 20% less likely to re-offend. In Rhode Island – as in Connecticut – there is pressure on the state budget and spending on corrections. By far the best way to reduce spending is to improve inmate rehabilitation and reduce recidivism. Treatment does that.

Yet there are challenges with the MAT program within our facilities. We are constantly vigilant for any diversion of medications, and have had to educate staff about the benefits of MAT in order to achieve buy-in from correctional staff. Changing longstanding beliefs about addiction and intervention takes time. But we believe the challenges are not insurmountable, and that the benefits to this program far outweigh the difficulties.

Please feel free to contact me if you have questions. The MAT program has been successful for Rhode Island, and I am strongly supportive of correctional MAT programs. I would be happy to discuss our experience further.

Sincerely,

Patricia A. Coyne-Fague

Acting Director

CC: The Honorable Members of the Public Health Committee